2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 11, 2009
Secretary of State

DOCUMENT# P96000057109

Entity Name: ORANGE PARK PRODUCE, INC.

Current Principal Place of Business:

570 KINGSLEY AVENUE
ORANGE PARK, FL 320734830

New Principal Place of Business:

Current Mailing Address:

570 KINGSLEY AVENUE
ORANGE PARK, FL 320734830

New Mailing Address:

FEI Number: 59-3384332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WINKLER, JOHN S
2515 OAK STREET
JACKSONVILLE, FL US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WINFIELD, RAYMOND J JR.
Address: 22250 PROVIDENCE DRIVE STE 203
City-St-Zip: SOUTHFIELD, MI

Title: PD ( ) Delete
Name: JEZIERSKI, KENNETH
Address: 1013 NEOBISH
City-St-Zip: ESSEXVILLE, MI

Title: VD ( ) Delete
Name: JEZIERSKI, CHERYL
Address: 1013 NEBOBISH
City-St-Zip: ESSEXVILLE, MI

Title: TSD ( ) Delete
Name: JEZIERSKI, DAVID A
Address: 7364 CINNAMON TEA LANE
City-St-Zip: JACKSONVILLE, FL 32244

Title: D ( ) Delete
Name: PUSTAY, KAREN
Address: 7364 CINNAMON TEA LANE
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID JEZIERSKI TSD 09/11/2009

Electronic Signature of Signing Officer or Director Date